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西部州岛

P. HUNT 03/21/23

COVER LETTER

TO:

Registration Section

Division of Cor	porations					
Labor Scrip	nt, LLC					
SUBJECT: Name of Limited Liability Company						
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please return all correspo	ondence concerning this matter	to the following:				
	Danielle Warren					
	Name of Person					
	Labor Script, LLC					
	Firm/Company					
	3960 Domain Court					
		Address				
	Melbourne, FL 32934					
		City/State and Zip Code				
	daniimarie1@gmail.com	16.6.	···			
For further information c	e-mail address: (to be used for future annual report no all:	ourication)			
Danielle Warren		321 795-0497				
Name of Person		at () Area Code Dayti	me Telephone Number			
Enclosed is a check for the	ne following amount:					
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
Mailing Address: Registration Section		Street Address: Registration S	ection			
Division of Corporations		Division of Co	Division of Corporations			
P.O. Box 6327 Tallahassee, FL 32314			The Centre of Tallahassee 2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Labor Script, LLC	
(Name of the Limited	d Liability Company as it now appears on our records.) A Florida Limited Liability Company)
The Articles of Organization for this Limited Liab Florida document number 1.23000060070	bility Company were filed on 02/01/2023 and assigned and assigned
This amendment is submitted to amend the follow	wing:
A. If amending name, enter the new name of t	the limited liability company here:
The new name must be distinguishable and contain the wor	rds "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applical	ble:
Principal office address MUST BE A STREET	ADDRESS)
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE B	<u></u>
B. If amending the registered agent and/or regagent and/or the new registered office address	gistered office address on our records. <u>enter the name of the new registe</u> <u>here</u> :
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	City Zin Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605. F.S. Or. if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Danielle Warren	3960 Domain Court, Melbourne, FL 32934	■Add
			□Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. YMUSA / W Signature of a member or authorized representative of a member